

Systems Integration and Alignment: Health Stakeholders meeting
Tuesday, July 17th, 2012
3:00pm – 4:30 pm
33 W. Monroe, Chicago – 24th Floor
Conference call in number: 888-494-4032
Pass code: 719 851 8485#

Meeting Minutes

I. Welcome and Introductions - (3:00pm-3:15pm)

Meeting participants:

Karen	Berman
Vanessa	Rich
Christy	Serrano
Scott	Allen
Adam	Becker
Carie	Bires
Pam	Borchardt
Juanona	Brewster
Peter	Byrne
Jeanna	Capito
Jennifer	Cartland
Donna	Cech
Kim	Collins
Caryn	Curry
Joy	D'Amico
Julie B.	Doetsch
Lisa	Doot Abinoja
Misty	Drake, M.A.
Donna J.	Dreiske
Deanna	Durica, MPH
Karen	Freel
Phyllis	Glink
Dan	Harris
Reyna	Hernandez

Madelyn	James
Julie	Janssen, RDH, MA
Teresa	Kelly
Janine	Lewis
Annie	Lionberger
Janet	Maruna
Shannon	O'Neill
Paulina	Osinska
Deborah	Pergament
Madiha	Qureshi
Elliot	Regenstein
Leticia	Reyes
Christine	Robinson
Gwen	Smith
Kendall	Staggs
Adrienne	Stewart
Bryan	Stokes
Bradley	Stolbach, Ph.D
Anne	Studzinski
Karin	Vander Ploeg Booth
Lisa	Weber, MSW
Granada	Williams
Amy	Zimmerman

II. Give Background on the Illinois Early Learning Council - (3:15pm-3:20pm)

Systems Integration and Alignment Committee (SIAC) Co-Chair, Karen Berman, gives an overview of the Early Learning Council's (ELC) statutory and operating mission and new committee structure. Next, Vanessa Rich, SIAC Co-Chair, gives an overview of past ELC accomplishments in order to illustrate the kind of work that the ELC does. Vanessa also

discusses how an early childhood development system is comprised of interrelated systems working together toward a common goal of ensuring the healthy growth and optimal development of young children in the context of their families. An illustrated Venn diagram of an early childhood development system (developed by the Early Childhood Systems Working Group) is shared with the group via a power point presentation.

III. Illinois Early Childhood Dashboard and Success Indicators - (3:20pm-3:30pm)

An illustrated draft of the ELC's Illinois Early Childhood Dashboard (developed by the ELC Ad Hoc Committee) is shared with the group via a power point presentation. Karen Berman shares that part of the charge of the Health Stakeholders Group under the ELC is to help define health success indicators for the health section of the Dashboard. This group (or a sub-group) of the Health Stakeholders participants interested in contributing to this work will meet in the near future to discuss alternative health success indicators for the Dashboard and ultimately make a set of recommendations to the ELC Ad Hoc Committee on appropriate health success indicators (primary and secondary).

IV. Potential work for the Health Work Group (3:30pm-4:00pm)

The health work under SIAC will likely follow two related pathways: producing systems change and addressing gaps within discrete health areas across early childhood systems. Karen Berman and Vanessa Rich lead in explaining the work of systems change and in giving concrete examples of what potential work may look like.

Systems Initiative Work (i.e. Systems Change)

Vanessa Rich introduced definitions of systems change (as defined in "A Framework for Evaluating Systems Initiatives," Julia Coffman, www.buildinitiative.org), the five areas of focus for systems change and the theory of action for systems change is shared at the meeting via power point. The Co-Chairs explain that there are various ways of approaching Systems Change that are separate from measuring discrete outcomes for select health areas. Conducting this work will involve linking to other health tables and public agencies.

Tackling Discrete Health Issues

Karen Berman then gives examples of current (and potential) work that is being done at other tables that aim to address issues within selected health areas: vision, preventing obesity, mental health, and oral health.

In the area of vision, Karen Berman shares that the Preschool Committee of the Illinois Children's Vision Coalition has conducted several studies assessing the availability of screeners and the accessibility of screener trainings. The Preschool Committee is awaiting the findings of the National Expert Panel convened by the National Center to establish scientifically based best practices for vision screening protocols, data collection and surveillance. With these published reports, the Committee will assess how Illinois complies with these national standards and will set a course of action to address areas of need. Potential future work for the ELC includes embedding and integrating the national standards in IL.

In the area of preventing obesity, Karen Berman shares that the City of Chicago's Inter-Departmental Task Force on Childhood Obesity Prevention (specifically DFSS and CDPH) worked with the Chicago Board of Health to pass new standards for licensed child care related to nutrition and physical activity. IL Action for Children, Erickson Institute, CLOCC, and

CDPH developed an in-depth training curriculum and delivery mechanism to help centers learn about and meet these new standards. An evaluation of the effectiveness of the trainings indicates that providers made important changes to meet the new standards. Potential future work for the ELC includes expanding the Chicago nutrition and physical activity standards to the rest of IL.

In the area of mental health, Illinois has a history of growing support for mental health consultation for early childhood programs (e.g. including early childhood education, childcare, the Early Intervention system, health, child welfare, home visiting, Head Start and community mental health agencies). Funding for all of these efforts has changed over the last few years due to the drop in state funding, while at the same time recognition of the importance for this work has grown. Potential future work for the ELC includes examining current support for mental health consultation, collaborating with the IL Child Mental Health Partnership (ICMHP), building greater awareness of the importance and making recommendations for ensuring that all early childhood programs have access to mental health consultation.

Further, in the area of mental health, the Illinois Association for Infant Mental Health and ICMHP have developed an early childhood mental health credential based upon demonstrating a set of specific competencies relating to young children birth to five. This project is now in the process of completing the first cohort of post master's level professionals moving through the process. Potential future work for the ELC includes building awareness of and support for this effort across various early childhood sectors.

Finally, in the area of mental health, the Illinois Childhood Trauma Coalition (ICTC) has been trying to create a statewide strategic plan on implementing trauma informed policies and practices, and create a series of trauma trainings for a broad range of providers. The federal government is expected to release a new Medicaid ruling on how states can use Medicaid dollars to pay for interventions that will help children who have experience trauma. The Illinois Department of Children and Family Services recently asked for a federal IV-E waiver to allow the state to respond to the needs of children birth to three who have experienced trauma. Potential future work for the ELC includes considering how to imbed this knowledge, and implement and integrate these efforts within the larger health and early childhood systems.

Although specific projects in the area of oral health were not discussed during the meeting. Karen Berman acknowledged that there is a need to improve oral health care for young children. Potential future work for the ELC includes identifying action steps for integrating and aligning oral health services in early childhood systems.

V. Brainstorm - (4:00pm-4:25pm)

The brainstorm portion of the meeting involved discussing the task of defining success health indicators for the Early Childhood Dashboard and discussing other possible areas of work for the Committee to consider addressing. Reoccurring themes that came up in the discussion include: the need to improve “care coordination,” prevention (not just treatment) efforts, and maternal and prenatal health; to engage families in their children’s health and link them to community resources; to address the socio-emotional needs of the whole family; to enhance the role of the “medical home” in care coordination and health maintenance within its community; to create linkages to other health and early childhood tables in order to make our work “smarter,

not harder,” and to understand the current health needs and barriers of children (through data and/or research) in order to better prioritize the health work of the Committee.

The Co-Chairs stated that although there is a lot of work to be done towards successfully integrating health in early childhood systems, the goal of the Committee was not to create more work for the Health Stakeholders Group. There was interest in the group to survey each participant in order to find out what work is currently being done at other tables and organizations, and to assess the value-add that the work of the Health Stakeholders Group may have on a participant’s work. There was consensus in the room that the Health Stakeholders group should continue meeting as a body and work together to determine work deliverables and measures of success (or benchmarks) that the group should strive for. It was suggested that the group meet more frequently at the beginning (e.g. monthly) as work is being defined, and then less frequently (e.g. quarterly) as the work progresses.

VI. Next Steps - (4:25pm-4:30pm)

Once developed, Christy Serrano will email a participant work survey to the Health Stakeholders Group and include more information about meeting to discuss alternative health success indicators for the IL Early Childhood Dashboard. An outcome of the success indicators meeting may include making recommendations to the ELC Ad Hoc Committee for replacing the current health indicator on the Dashboard with alternative health indicators (primary and/or secondary) discussed at the meeting. More information on the time and date for the next Health Stakeholders Group meeting will follow the scheduling of the Dashboard health indicator meeting.

Handouts: Agenda; Power Point; Build Initiative paper: Including Health in a School Readiness
Agenda: Lessons from Illinois (McCann & Bruner)